required)

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## Attorn y Docket Number **DECLARATION FOR UTILITY OR** Scott C. Jordan First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date Declaration ☐ Declaration Submitted after Initial OR **Group Art Unit** Submitted Filing (surcharge (37 CFR 1.16 (e)) with Initial **Examiner Name** Filing

As a below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
WATER FLUSHING UNIT FOR A PRESSURE BALANCED SHOWER VALVE										
the execification of which		itle of the Invention)								
the specification of which										
is attached hereto  OR as United States Application Number or PCT International										
was filed on (MM/DD/YYYY)										
Application Number and was amended on (MM/DD/YYYY) (if applicable).										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
		(MARDEN 111)		123 10						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Application Number(s)	e (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.								
·	`									

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

Direct all corresp	oondence to:	Customer Nu or Bar Code L	1			OR 🗓	Correspondence a	ddress below			
Name Jack C. Munro, Agent of Record											
Address 28720 Roadside Drive, Suite 225											
Address											
City	City Agoura Hills				State	CA	CA <b>ZIP</b> 91301				
C untry	US Telephone 818-9				991-1	587	Fax 818-88	ax 818-889-0116			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
NAME OF SOLE OR FIRST INVENTOR:											
Given Name (first and middle [if any])  Scott C.  Family Name or Surname Jordan											
Inventor's Signature Sutt C. January Date 11-20-2003								0-2003			
Residence: City Ventura State C			CA	Country US	Citizenship	US					
Mailing Address 8381 Idyllwild Street											
Mailing Address											
City	Ventura	State (a)	iforni	a	ZIP	93004	Country	. IIS			
NAME OF SECOND INVENTOR:   A petition has been filed for this unsigned inventor											
						Family Name or Surname					
Inventor's Signature							Date				
Residence: City State				Country	Citizenship						
Mailing Address											
Mailing Address											
City		State			ZIP		Country	***************************************			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.											